

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE
(Other instructions
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

c/sf

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR J. M. Welch ✓		8. FARM OR LEASE NAME Federal	
3. ADDRESS OF OPERATOR Box 496, Artesia, NM 88211-0496		9. WELL NO. #1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit Letter M, 660' South Line, 500' West Line, SW 1/4 SW 1/4, Sec. 18, Twp. 16S, Range 31E		10. FIELD AND POOL, OR WILDCAT Henshaw	
14. PERMIT NO.		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA 18 - 16S - 31E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3,910' GR.		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

SEP 01 '88

O. C. D.
ARTESIA, OFFICE

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <u>Cemented gas zone off</u>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

On August 11, 1988 set retrievable bridge plug at 2,750' and ran cement retainer at 2,650'.

On August 11, 1988 cemented with fifty (50) sacks at 1500 pounds pressure.

On August 12, 1988 went in and drilled out cement and had the gas squeezed off. Put the well on pump to test it and it is now making three (3) barrels of oil per day.

OAR
AREA
AUG 25 11 29 AM '88
RECEIVED

18. I hereby certify that the foregoing is true and correct

SIGNED James M. Welch TITLE Operator DATE 8/24/88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS